

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	✓ 1/5/01
2	✓ 1/5/01
3	✓ 1/5/01
4	✓ 1/5/01
5	✓ 1/5/01
6	✓ 1/5/01
7	✓ 1/5/01
8	✓ 1/5/01
9	✓ 1/5/01
10	✓ 1/5/01
11	✓ 1/5/01
12	✓ 1/5/01
13	✓ 1/5/01
14	✓ 1/5/01
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31	✓
32	✓
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42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	Original
51	✓ 1/5/01
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy